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## \*BIBDATASHEET\*

CONFIRMATION NO. 3207

Bib Data Sheet

SERIAL NUMBER 10/623,378	FILING DATE 07/18/2003 RULE	CLASS 514	GROUP ART UNIT 1614	ATTORNEY DOCKET NO. CYPR 100 CIP DIV
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### APPLICANTS

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### \*\* CONTINUING DATA \*\*\*\*\*

This application is a DIV of 10/028,547 12/19/2001 PAT 6,602,911  
which is a CIP of 10/014,149 11/05/2001 PAT 6,635,675

### \*\* FOREIGN APPLICATIONS \*\*\*\*\*

### IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 08/10/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	CA	0	9	1
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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### TITLE

METHODS OF TREATING FIBROMYALGIA SYNDROME, CHRONIC FATIGUE SYNDROME AND PAIN

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )